## SCHEDULE A (FEC Form 3X)

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 149 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	BORDER HEALTH FEDERAL PAC		
λ.	Full Name (Last, First, Middle Initial) Subbarrao Yarra		Date of Receipt
	Mailing Address 6905  N. Cynthia		10 18 2010
	City McAllen	State Zip Code TX 78504	Transaction ID: SA11AI.13302  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	400.00
	Name of Employer Self-employed	Occupation physician	contribution
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  850.00	
	Full Name (Last, First, Middle Initial) Subbarrao Yarra		Date of Receipt
	Mailing Address 6905 N. Cynthia		11 18 2010
	City McAllen	State Zip Code	Transaction ID: SA11AI.13527
	FEC ID number of contributing federal political committee.	TX 78504	Amount of Each Receipt this Period 400.00
	Name of Employer Self-employed	Occupation physician	contribution
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1250.00	
	Full Name (Last, First, Middle Initial) Dr. Christopher Zaleski		Date of Receipt
	Mailing Address 6804 N. 1st		10 18 2010
	City	State Zip Code	Transaction ID: SA11AI.13303
	mcallen  FEC ID number of contributing federal political committee.	TX 78504	Amount of Each Receipt this Period  250.00
	Name of Employer selfemployed	Occupation physician	contribution
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2500.00	
Γ		l	1050.00